



*JPW*

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No.: 10/604,551 Confirmation No.: 1550  
Applicant(s): Robert Ehrhardt  
Filed: July 30, 2003  
Art Unit: 2853  
Examiner: J. Huffman  
Title: LABEL PRINTER WITH LABEL EDGE DETECTOR

Docket No.: 047717/274789  
Customer No.: 00826

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT  
37 C.F.R. § 1.121**

Sir:

In response to the Office Action dated January 7, 2005, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims beginning on page 2 of this paper.

**Remarks** begin on page 7 of this paper.

04/18/2005 PYASDOR 00000008 160505 10504551

01 FC:1201 400.00 DA

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Docket Number

10 604551

**CLAIMS AS FILED - PART I**

|                                                           | (Column 1)    | (Column 2)   |
|-----------------------------------------------------------|---------------|--------------|
| TOTAL CLAIMS                                              |               |              |
| FOR                                                       | NUMBER FILED  | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 24 minus 20 = | * 4          |
| INDEPENDENT CLAIMS                                        | 2 minus 3 =   | *            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |               |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

*ProAmend*

|                                                                         | (Column 1) | (Column 2)                       | (Column 3)                         |
|-------------------------------------------------------------------------|------------|----------------------------------|------------------------------------|
| AMENDMENT A                                                             | 7/27/04    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total                                                                   | * 34       | Minus                            | ** 24 = 10                         |
| Independent                                                             | * 3        | Minus                            | *** 3 =                            |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |            |                                  |                                    |

1, 13

|                                                                         | (Column 1) | (Column 2)                       | (Column 3)                         |
|-------------------------------------------------------------------------|------------|----------------------------------|------------------------------------|
| AMENDMENT B                                                             | 4/11/05    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total                                                                   | * 18       | Minus                            | ** 34 =                            |
| Independent                                                             | * 5        | Minus                            | *** 3 = 2                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |            |                                  |                                    |

|                                                                         | (Column 1) | (Column 2)                       | (Column 3)                         |
|-------------------------------------------------------------------------|------------|----------------------------------|------------------------------------|
| AMENDMENT C                                                             |            | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total                                                                   | *          | Minus                            | ** =                               |
| Independent                                                             | *          | Minus                            | *** =                              |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |            |                                  |                                    |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 385.00 |
| X\$ 9=    |        |
| X43=      |        |
| +145=     |        |
| TOTAL     |        |

OR

| RATE      | FEE |
|-----------|-----|
| BASIC FEE | 750 |
| X\$18=    | 72- |
| X86=      |     |
| +290=     |     |
| TOTAL     | 822 |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$ 9= |                |
| X43=   |                |
| +145=  |                |
| TOTAL  |                |

OR

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$18= | 180            |
| X86=   | 2              |
| +290=  |                |
| TOTAL  | 180            |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$ 9= |                |
| X43=   |                |
| +145=  |                |
| TOTAL  |                |

OR

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$18= | 3              |
| X86=   | 400            |
| +290=  | 3              |
| TOTAL  | 410            |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$ 9= |                |
| X43=   |                |
| +145=  |                |
| TOTAL  |                |

OR

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$18= |                |
| X86=   |                |
| +290=  |                |
| TOTAL  |                |